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APPLICANTS

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** CONTINUING DATA ***** *EK (none)*

** FOREIGN APPLICATIONS ***** *EK (none)*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 12	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>EK</i>	Initials		

ADDRESS
 47396
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TITLE
 A SEMICONDUCTOR DEVICE HAVING AT LEAST ONE SOURCE/DRAIN REGION FORMED ON AN ISOLATION REGION AND A METHOD OF MANUFACTURE THEREFOR

FILING FEE RECEIVED 1184	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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